U.S. Expertment of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number . U - 9

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscai Year Covered From:

	1 / 2004 Through: 12/31 / 2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name DANIEL J KIEFFER	Name IBEW LOCAL UNION 160
	Labor Organization File Number 022-522
P.O. Box, Bidg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 24639, 608 AVE	Street 2522 MARSHALL STREET N.E.
City LITCHFIELD	City MINNEAPOLIS
State MN. ZIP Code + 4 55355	
Position in Tabor organization. Business Rep	
Dazinics Ner	RESENTATIVE
Heid an interest in, engaged in transactions (including loans) with onetary value from an employer whose employees your organi	-zadon represents or is actively seeking to represent.
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
lame EAST CENTRAL ENERGY	Tanadani, or moonie.
EAST CRNIKAL ROLLEGY	LABOR - MONAGE MENT MEETING
	1/25/26
rade Name, if any:	COMPANY BOUGHT LUNCH
O_Box, Bidg., Room No., if any	
O_Box, Bidg., Room No., if any	
	COMPANY BOUGHT LUNCH
reet 4/2 NoRTH MAIN ST.	7.b. Amount.
reet 4/2 North Main ST. TORAHAM	COMPANY BOUGHT LUNCH
reet 4/2 North Main ST. TSRAHAM	7.b. Amount.
I.O. Box, Bidg., Room No., if any greet 4/2 North Main ST. IN TRAHAM ale MH. ZIP Code +4 55006	7.b. Amount.
reet 4/2 NoRTH MAIN ST. IN ISRAHAM ate MH. ZIP Code +4 SSOO6 Signature and verification. The undersigned declares, under penalty including the information section.	Gompany Bought Lunch 7.b. Amount. 99.00 Ignature Once Penjury and other applicable penalties of the law, that elloft the information
treet 4/12 North Main ST. If Signature and verification. The understand dealers.	Gompany Bought Lunch 7.b. Amount. 99.00 Ignature Once Penjury and other applicable penalties of the law, that ell of the information

Kame of Person Filing	File Number U-
B. Held an interest in or derived income or economic benefit with mor substantial part of which consists of buying from, seiling or leasing to, of an employer whose employees your labor organization represents (2) any part of which consists of buying from or selling or leasing direct dealing with your labor organization or with a trust in which your labor	or oftherwise dealing with the business or is actively seeking to represent, or
8. Name and address of Business (including trade name, if any).	S. Business deals with:
Name .	
Trade Name, if any.	
P.O. Box, Bldg., Room No., if any	b. Trust
Street	c. Employer
City	
State ZIP Code + 4	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	
Trade Name, if any:	.
P.O. Box, Bidg., Room No., if any	P ¹
Street	∤ ÷
City	11.D. Approximate dollar value of such dealing.
State ZIP Code + 4	12.a. Nature of interest held or income received.
ZIP Code + 4	
	$igg\{$:
	12.b. Amount.
C. Received from any employer (other than an employer covered or from any labor relations consultant to an employer any payment of mo	under parts A and B above)
3.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.
(Including trade name, if any),	
Vame	
rade Name, if any:	
C. Box, Bldg., Room No., if any	
treet	
ity	
tate ZIP Code ÷ 4	
	- ,
3.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.
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